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Disruptive Behavior Disorders and School Based Intervention Services

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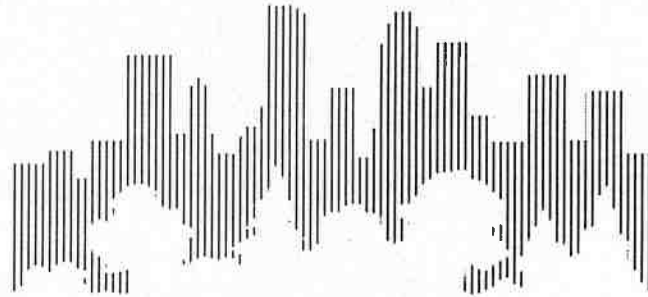
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MASTERS IN SOCIAL WORK THESIS

Peggy S. Swenson

Disruptive Behavior Disorders and School
Based Intervention Services

2001

MSW
Thesis

Thesis
Swenso

DISRUPTIVE BEHAVIOR DISORDERS AND SCHOOL BASED
INTERVENTION SERVICES

PEGGY S. SWENSON

Submitted in partial fulfillment of
the requirements for the degree of
Masters of Social Work

AUGSBURG COLLEGE
MINNEAPOLIS, MINNEOSTA

2001

MASTER OF SOCIAL WORK
AUGSBURG COLLEGE
MINNEAPOLIS, MINNESOTA

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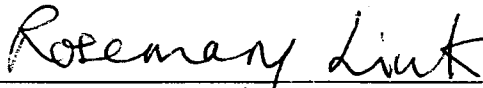
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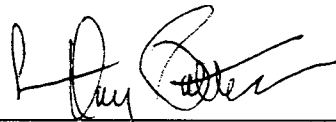
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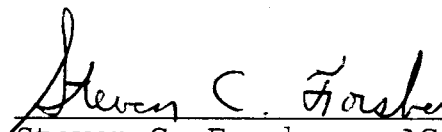
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ABSTRACT

DISRUPTIVE BEHAVIOR DISORDERS AND SCHOOL BASED INTERVENTION SERVICES

A QUANTITATIVE STUDY

PEGGY S. SWENSON

JUNE 29, 2001

This explorative quantitative study investigates the perceptions and knowledge of elementary school teachers in regard to the disruptive behaviors displayed by an increasing number of students. This study also addresses the methods of intervention teachers find to be effective in reducing disruptive behaviors in the classroom. A Likert-scale survey was used to gather information from seventy-six teachers of students in first through fifth grade. Survey questions focused on factors that can contribute to disruptive behaviors as well as several methods of interventions utilized in the five schools located in the four school districts surveyed.

TABLE OF CONTENTS

List of Tables.....	i
CHAPTER ONE: INTRODUCTION	
A. Statement of the Problem.....	1
B. Research Questions.....	4
C. Summary.....	5
CHAPTER TWO: LITERATURE REVIEW	
A. Overview.....	7
B. Review of the Literature.....	7
1. Disruptive behaviors defined.....	7
2. Factors contributing to disruptive behavior disorders.....	10
3. School based identification of disruptive behavior disorders.....	21
C. Summary.....	24
CHAPTER THREE: THEORETICAL FRAMEWORKS	
A. Overview.....	26
B. Theoretical frameworks of school based intervention services.....	26
C. Prevention efforts in the school Setting.....	31
D. Gaps in school based intervention services.....	34
E. Summary.....	36

CHAPTER FOUR: METHODOLOGY

A. Overview.....	37
B. Research Questions.....	37
C. Research Design.....	38
D. Important Concepts and Units of Analysis.....	39
E. Characteristics of the Study Population.....	42
F. Recruitment of Participants.....	43
G. Procedure.....	44
H. Development of Questionnaire.....	46
I. Data Analysis.....	48
J. Protection of Human Subjects.....	49
K. Summary.....	51

CHAPTER FIVE: RESULTS

A. Overview.....	52
B. Research Questions.....	54
C. Summary.....	63

CHAPTER SIX: FINDINGS

A. Overview.....	65
B. Summary of Findings.....	65
C. Discussion.....	66
D. Limitations.....	70
E. Implications for Practice and Policy in Social Work.....	71

REFERENCES.....	75
APPENDICES.....	79

- A. Augsburg Institutional Review Board
Approval Letter
- B. Letter of Permission to Distribute Survey
from Herbert S. Nyquist Elementary School
- C. Letter of Permission to Distribute Survey
from Milaca Public Schools
- D. Letter of Permission to Distribute Survey
from North Elementary School
- E. Letter of Permission to Distribute Survey
from South Elementary School
- F. Letter of Permission to Distribute Survey
from Onamia Public Schools
- G. Consent Form
- H. Survey

LIST OF TABLES

Table 1:	Participants years of experience teaching and school district of current employment.....	51
Table 2:	Participants responses regarding the relationship between emotional understanding and disruptive behaviors.....	54
Table 3:	Participants responses regarding the relationship between intellectual functioning and disruptive behaviors.....	54
Table 4:	Participants responses regarding the relationship between birth weight and disruptive behaviors.....	55
Table 5:	Participants responses regarding the relationship between ADHD and disruptive behaviors.....	55
Table 6:	Participants responses regarding the relationship between a child's experience of abuse and disruptive behaviors.....	55
Table 7:	Table summarizing tables 2 - 6.....	56
Table 8:	Participants responses between causes of disruptive behaviors and the degree of the problem.....	56
Table 9:	Participants responses regarding years of teaching experience and perception of disruptive behaviors as a concern.....	57
Table 10:	Participants responses regarding the number of disruptive behaviors they experience in a week.....	58
Table 11:	Participants level of comfort consulting with appropriate school staff regarding the disruptive behaviors of their students.....	60

CHAPTER I: INTRODUCTION

Statement of the Problem

There have always been elementary school students who have displayed behavior that is less than socially acceptable. Many of us who were educated in rural and suburban communities in the United States prior to the 1990's can think back to our school days and remember the bully who enjoyed intimidating and belittling others, the class clown who would say or do almost anything for a laugh or the person who always appeared to be looking for someone to fight. In spite of this, most of us probably felt reasonably safe in our schools and in our classrooms.

Throughout our elementary school years, most of us did not observe students overtly defying the directions given by a teacher or attempting to physically harm a teacher. Most of us never watched as a student lost control of himself or herself and began running around the classroom tipping furniture over or throwing objects or yelling. Most of us did not witness a student being physically removed from a classroom due to behavior that resulted in a threat of physical harm to the student or others.

Disruptive behaviors such as these are no longer unheard of events or isolated incidents in many schools: "Antisocial behavior, youth violence and student safety have emerged as primary concerns in American schools and the larger society" (Sprague & Walker, page 367).

Many students who have attended elementary schools in recent decades have experienced and/or witnessed disruptive behaviors; these behaviors are dealt with on a daily basis in many elementary schools. In some classrooms, disruptive behaviors occur so frequently that the students have nearly perfected their ignoring skills. Classroom teachers are not able to ignore these behaviors; they are required to manage the disruption and continue to educate the classroom students: "General educators at all grade levels must deal with a burgeoning number of students who are a challenge to manage and instruct" (Gable, Quinn, Rutherford & Howell, page 106). As a result, teachers are verbalizing frustration aimed at the increasing amount of instruction time spent addressing the behavioral outbursts displayed by students.

In a study on teacher's views of issues involving students' mental health needs approximately two-thirds of regular classroom teacher respondents reported feeling "somewhat to very overwhelmed by the mental health needs of their students" (Roeser & Midgley, page 125). Debate in regard to prevention and intervention efforts and the success and failure of these procedures has resulted. According to the 2001 National Council for Community Behavioral Health: "Growing numbers of children are suffering needlessly because their emotional, behavioral and developmental needs are not being met by the very institutions created to take care of them" (National Council for Community Behavioral Health, page 1). These noted institutions include educational systems and family systems among others. This already growing number of children with behavioral difficulties is projected to increase dramatically throughout the upcoming decades in the United States as well as internationally.

At this time, approximately ten percent of children suffer from mental illness severe enough to cause a level of impairment. The World Health Organization reports that by the year 2020, "childhood neuropsychiatric disorders will rise proportionately...

becoming one of the five most common causes of morbidity, mortality and disability among children" (National Council for Community Behavioral Healthcare, page 10).

This thesis, which includes a literature review and survey, will provide a definition of disruptive behavior disorders and will discuss factors identified in current research as contributing to disruptive behavior disorders. School-based identification of disruptive behavior disorders will also be presented along with theoretical frameworks of school based-intervention services including cognitive behavioral theory, family systems theory, the risk-resilience model and the implementation of preventative efforts in school settings. An identification of gaps in services provided to students in school settings will also be included.

Research Questions

The purpose of this research project is to investigate the perceptions and knowledge of elementary school teachers in regard to the disruptive behaviors of some students, and to discover what methods of intervention teachers have found to be most

effective. Since many students with disruptive behavior disorders often spend the majority of the school day in mainstream classroom settings, it is important for teachers to have a basic understanding of causation and prevention of disruptive behaviors. It is also salient that classroom teachers have an understanding of the intervention(s) available, and a belief that the intervention(s) are producing desired results. This study addresses two research questions:

- 1) **How do elementary school teachers perceive the disruptive behaviors displayed by students?**
- 2) **According to elementary school teachers, what school-based intervention services are most effective in reducing disruptive behaviors in the classroom?**

Summary

This chapter included a brief overview of the issues being researched including the increasing level of attention being focused on student's displaying disruptive behaviors and the growing concern regarding

such behaviors expressed by educators. The purpose for the study and the two research questions are also stated in this chapter. The following chapter entails a review of current literature focused on various aspects of disruptive behavior and children.

CHAPTER II: LITERATURE REVIEW

Overview

In examining the questions of how elementary school teachers perceive their role in addressing the disruptive behaviors of students and what interventions are most successful, it is necessary to review the existing literature. This chapter will include a review of relevant writings that identify:

- 1) Risk factors contributing to disruptive behavior Disorders.
- 2) How such behaviors are identified in school settings.
- 3) Prevention efforts involving schools.
- 4) Gaps in the delivery of services schools provide.

A definition of actions being considered disruptive behaviors disorders for purposes of this thesis begins this chapter.

Disruptive Behaviors Defined

The definition of disruptive behaviors for the purpose of this study will include a spectrum of behaviors displayed by students in the classroom. These behaviors include: *talking out of turn, not*

remaining seated, arguing with staff members, losing temper, deceitfulness or being purposefully untruthful, theft, defiance toward staff members, verbal threats of harm, physical threats of harm, physical harm to self or others and property destruction. For students who display these behaviors to be considered students with disruptive behavior disorders, the behaviors must be displayed at a level that is more frequent and/or severe than those typically observed in classroom peers. While many of these behaviors can be observed in students diagnosed with oppositional defiant disorder (ODD), conduct disorder (CD), attention deficit hyperactivity disorder (ADHD) and/or emotional behavioral disorder (E/BD), students with no formal diagnosis also display these behaviors.

According to the American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) criteria, conduct disorder is a condition in which a "persistent pattern of behavior that violates the basic rights of others or violates major age appropriate societal norms or rules" (DSM-IV, 1994, page 85). There are four major categories of conduct disorder; these categories include:

- 1) Aggressive conduct which includes behaviors that threaten physical harm to people or animals.
- 2) Non-aggressive conduct which includes behavior that causes damage to property.
- 3) Deceitfulness or theft which includes deliberate untruthfulness and taking property that belongs to another person.
- 4) Serious violation of rules which is open to the interpretation of the diagnostician (DSM-IV, 1994, page 85).

Conduct disorder has become one of the most frequently diagnosed conditions for children in the United States; while it is more common in males than females, its prevalence is significant: "It is found in six to sixteen percent of males and two to nine percent of females" (DSM-IV, 1994, page 86).

The DSM-IV (1994) defines Oppositional Defiant Disorder as:

a recurrent pattern of negativistic, defiant, disobedient and hostile behaviors toward authority figures that persists for at least six months. Symptoms of ODD include losing temper, arguing with adults, non-compliance, blaming others for own mistakes or misbehavior, spiteful or vindictive behaviors and purposefully annoying others. These behaviors occur more frequently than typically observed in peers and must lead to

significant impairments in social, academic or occupational functioning (DSM-IV, 1994, page 91). According to the DSM-IV, ODD is diagnosed in from two to sixteen percent of children" (DSM-IV, 1994, page 92).

Factors Contributing to Disruptive Behavior Disorders

Research indicates there is a growing number of students who are experiencing behavioral difficulties. "Violence and other antisocial, aggressive behaviors are growing problems" (Fraser, page 19). A 1997 study on teachers' views of issues involving students' mental health indicates that, approximately twenty-five percent of students are considered to be at risk for truancy, academic failure, involvement in chemicals and other behaviors that have the potential to become dangerous and nearly twelve percent of students are believed to have emotional difficulties in the moderate to severe range (Roeser & Midgley, 1997, p. 115-116).

Many students do not receive services that would address areas of difficulty or relieve symptoms of concern (Roeser & Midgley, 1997).

Recent studies suggest that disruptive behaviors can result from several developmental pathways including covert, overt and authority-conflict problems.

The covert pathway leads from early childhood lying and cheating to more serious offenses such as shoplifting and stealing. The overt pathway leads from early childhood taunting and bullying of other children to assault and street violence. The third pathway is one that begins in late toddlerhood and is characterized by a wide range of authority-conflict problems (Fraser, page 20).

These pathways are not mutually exclusive and once begun down a pathway, such behaviors may desist. Many children displaying antisocial behaviors such as these will be referred to service agencies; however, not nearly all that could benefit from needed services (Fraser, 1996).

Several factors contributing to disruptive behavior disorders in children include the child's understanding of emotions, intellectual functioning, the birth weight of the child, the existence of ADHD coupled with additional disruptive behavior disorders,

the experience of child abuse and disruption of family life due to socio-economic reasons.

Children exhibiting disruptive behavior disorders often display deficits in their understanding of emotions. They often display greater difficulties expressing basic emotions such as happy, sad, angry and nervous than that of their peers (Cook, Greenberg & Kusche, 1994). The inability of a child to identify and verbally express emotions can foster frustration, which, in turn, can result in feelings being expressed through negative actions.

Results from a study on the relationship between emotional understanding and disruptive behavior problems in elementary school children indicated that children who were rated higher in exhibiting behavior difficulties also displayed deficits in their ability to understand emotions (Cook, Greenberg & Kusche, 1994). This was assessed through requesting verbal examples of emotional experiences based on the feelings of happy, sad, mad, scared and love: "Children who were rated as highest in behavior problems provided significantly fewer appropriate responses" (Cook, et. al, 1994).

Another aspect of emotional understanding lies in the ability to assess the feelings, thoughts and behaviors of others. Children with disruptive behavior disorders are more likely to perceive others as angry: "Aggressive children often make thinking errors by erroneously assigning hostile intent to neutral social cues. They are not good at figuring out the feelings, thoughts and actions of others" (Fraser, page 21).

Behaviors that are considered disruptive take place on a social level, yet emotional and academic ability both play an important role in the disruptive act. Impulsivity is a common aspect of childrens' disruptive behavior; however, because children with disruptive behavioral disorders often have an inhibited ability to consider and verbalize emotions than do their peers, they are also less able to understand their emotions which leads to increased levels of frustration which can increase the likelihood of external disruptive behavior (Cook, et. al., 1994). "For many children, developmental deficits in cognitive processes are associated with early aggressive behaviors, school failure and other negative behaviors" (Fraser, page 19).

Saliency is in the inclusion of all aspects of behavioral and emotional functioning as opposed to specific areas such as behavior alone in determining how various aspects of functioning relate to each other and impact each other. The experiences, motivation levels and socialization of children occur on an individual basis and as such, emotional functioning ability alone does not explain disruptive behaviors (Cook, et. al., 1994).

Existing literature supports a connection between reading and general achievement and disruptive behavior displayed by children (Nigg, Quamma, Greenberg & Kusche, 1999). Young children exhibiting disruptive behaviors such as temper tantrums, noncompliance, attention-seeking and hyperactivity, often experience both peer rejection and academic difficulties (August, Realmuto, MacDonald III, Nugent & Crosby, 1996). One explanation of this association is found in the fact that assessment of emotional understanding is often completed through verbal measures. A child's ability to use appropriate words to relay his or her emotions is directly linked to his or her academic abilities.

Disruptive behavior can exist on both external and internal levels within children: "Inhibitory control appeared important to externalizing behavior, and verbal fluency to assertiveness and internalizing behavior" (Nigg, et. al., 1999). While externalized behaviors are thought to be related to cognitive development and functioning, internalized behaviors may be directly related to verbal fluency in that when children lack age-appropriate verbal skills, they are less able to verbalize emotions and as a result hold feeling inside (Nigg, et. al., 1999). The link between behavior and intellectual functioning offers support for the inclusion of assessing intellectual functioning along with emotional development in children with severe disruptive behavior disorders (Cook, et. al., 1994).

New research into brain ability and functioning is disproving former beliefs that genes alone determine an individual's ability to function socially, intellectually, etc. Recent research shows environment has an extensive impact on abilities as well; it is a combination of nature and nurture that determines achievement abilities. The stimulation an infant or child receives results in brain growth and

an increase in brain connections. If little stimulation is received, the result will be fewer brain connections. Early brain stimulation is a precursor for educational learning as well as the development of positive interactions with others (Newberger, 1997).

Literature also exists supporting higher incidences of disruptive behaviors in children with low birth rates. Mothers of children with low weights at birth report their children to be developmentally behind their peers; they also report a larger degree of behavior difficulties (McCormick, Workman-Daniels & Brooks-Gunn, 1996). One explanation for this connection can be explained in that prior to birth, "the type of nourishment and care a child receives affects not only the wiring of his or her brain but also the qualities of his or her experiences beyond the first few years of life" (Newberger, page 5).

While low birth weight children display lower levels of emotional health and behavioral control than average birth weight children, the connection between low birth weight and increased disruptive behaviors can be contributed to the risk factors that are associated with low birth weight such as chronic

health problems experienced by children and maternal mental health status (McCormick, et. al., 1996). Children with chronic illnesses display conduct disorders at three times the rate of healthy children (Steiner, Dunne, Ayres, Arnold, Benedek, Benson, Bernstein, Bernet, Bukstein, Kinlan, Leonard & McClellan, 1997). The connection between low birth weight and increased disruptive behaviors may also be explained, at least in part, by the fact that poverty produces these and other risk factors for children (Journal of the American Academy of Child and Adolescent Psychiatry, March, 1999).

An additional factor contributing to disruptive behavior disorders in children includes the prevalence of ADHD and its effect on behavior. Although a diagnosis of ADHD alone is included in the umbrella of disruptive behavior disorders, findings show that it can be an early sign that a more serious behavior disorder is developing (August, et. al., 1996). Existing studies report that children diagnosed with a combination of ADHD and an early disorder such as oppositional defiant disorder or conduct disorder: "constitute a subgroup that is at an elevated risk for developing antisocial behaviors and sustaining this

pattern through adolescence with progression into delinquent activity and criminal offending" (August, et. al., 1996). ADHD coupled with ODD or CD intensifies the possibility of the development of further disorders such as antisocial personality and substance abuse in both child and parents, negative family relationships, rejections by peers and harmful parenting practices. Another aspect of this comorbidity--the presence of more than one disruptive behavioral disorder-- that raises concern includes that "there is a higher risk for greater psychiatric morbidity and perhaps suicide for children with ADHD plus mood disorders" (August, et. al., 1996).

The final factor contributing to disruptive behavioral disorders in children that this literature review will discuss is that of the child's experience of maltreatment by his or her parents. A strong predictor for childhood behavior disorders has been found to be linked to verbal and corporal punishment practices utilized by parents (Brenner & Fox, 1998). Children who have experienced abuse through parenting practices and inconsistencies in discipline practices incur a higher risk level for developing a disruptive behavior disorder. Children with these experiences

are also more likely to be negatively affected by viewing media violence (Steiner, Dunne, Ayres, Arnold, Benedek, Benson, Bernstein, Bernet, Bukstein, Kinlan, Leonard & McClellan, 1997). It may be that these children, because of their experiences of maltreatment, become socialized to be violent. They learn to react to their anger through disruptive and/or violent actions.

Recent research into how the brain reacts to stress shows that external experiences affect brain development. There is a stress-sensitive system in the human body that is activated in children when they experience emotional or physical trauma. When this system is activated, it produces the steroid hormone, cortisol. High levels of cortisol have been found to kill brain cells and reduce the number of connections between brain cells in the areas of the brain that are important for learning and memory showing a linkage between trauma and impairment in learning and development (Newberger, 1997).

Children who are emotionally neglected or abandoned early in life are not only more likely to have difficulty in learning but also may have more trouble experiencing empathy, attachment and

emotional expression. They may also experience impairments in cognitive ability and have difficulty responding appropriately or productively in stressful situations (Newberger, page 6).

Obsessive-compulsive disorder (OCD) in children is not included under the umbrella of disruptive behavior disorders in existing research; however, this disorder is fairly common. OCD is now considered one of the four most common psychiatric disorders among Americans. The prevalence of obsessive-compulsive disorders in children has been estimated to be one in two hundred; this is equal to approximately three or four students in an average sized elementary school (Adams & Burke, 1999).

The clinical definition of obsession refers specifically to thoughts, impulses, urges or images that a person cannot remove from his or her mind; while compulsions are ritualized behaviors that result from obsessions. Compulsions manifest themselves in actions continually repeated such as excessive hand washing or showering, continually checking door or

window locks, repeating prayers or poems over and over either verbally or internally.

In the school setting, OCD can contribute to disruptive behaviors such as inability to listen to and follow directions verbalized by the teacher, inability to complete assigned tasks, elevated frustration levels and school avoidance (Adams & Burke, 1999).

School-Based Identification of Disruptive Behavior Disorders

In school settings, disruptive behavior disorders are determined through a protocol of various psychological, educational and behavioral assessments completed by educators, parents and psychologists. One method of identifying needs is through what is termed a functional assessment. Through the utilization of functional assessment, relationships between student behavior and environment can be identified. Examples include interviews, teacher reports, behavior rating scales, direct observations and questionnaires. In this format, data is collected from a variety of sources over a period of time. Hypotheses are then generated from the data obtained and intervention

strategies are devised and implemented (Jolivette, Lassman & Wehby, 1998). A six-step format for utilization of functional assessment is recommended.

These steps include:

- 1) Determine evidence of an academic deficiency.
- 2) Determine the existence or nonexistence of medical or sensory issues.
- 3) Determine the specific skill deficit.
- 4) Devise a hypotheses and interventions surrounding the deficiency.
- 5) Assess the whole of the intervention's effectiveness.
- 6) Implement and evaluate a specific intervention's effectiveness (Jolivette, et. al., 1998).

As the number of students exhibiting social, emotional and behavioral difficulties increases, the demands made on teachers to create a learning environment that includes effective behavior management strategies also increase. Because of this, teachers will continue to be an important referral mechanism for their students. Teachers spend a significant amount of time with children, and as such, their perspective is often salient in determining the need for intervention services and in the diagnosis of disruptive behaviors.

The information obtained from teachers who have observed the child over an extended period of time in the classroom is extremely helpful in forming an accurate diagnosis because they have had opportunity to observe positive and negative behaviors surrounding interactions with peers and adults, transitions between activities and academic abilities (Wolraich, Feurer, Hannah, Baumgaertel & Pinnock, 1998).

Included in the rating scales utilized by educators are The Connors Rating Scale, which assesses child hyperactivity, the Child Behavior Checklist, which is a behavior rating scale, the Connors Abbreviated Teacher Rating Scale, specifically for ADHD, the SNAP, which includes DSM behavioral symptoms, the Disruptive Behavior Disorders Checklist, which extended reporting to all disruptive behavioral disorders, and the Vanderbilt ADHD Diagnostic Teacher Rating Scale, which was designed to address limitations of the existing scales (Wolraich, et. al., 1998).

Because of the significant amount of time teachers spend with students, they are often requested to provide pertinent data in regard to displayed behaviors of the children undergoing the process of

assessment. Teacher statements and ratings are used by mental health professional in as part of the criteria used to obtain a diagnosis for children with disruptive behavior disorders (Abikoff, Courtney, Pelham & Koplewicz, 1993).

Studies as to the accuracy of teacher's assessments are then important. Evaluations as to the accuracy of teacher's ratings have been completed with findings that both regular and special education teachers were accurate in their rating of ADHD behaviors; however, teachers showed some difficulty in accurately rating behavior of children displaying hyperactivity coupled with ADHD symptomatic behaviors when a child engaged in problematic behaviors associated with oppositional defiant disorder. This indicates that teachers are more likely to rate children displaying conduct disorders as also exhibiting hyperactivity (Abikoff, et. al., 1993).

Summary

This chapter provided the definition of disruptive behavior disorders being used for this thesis. Some of the factors that contribute to disruptive behavior disorders in children were

presented in this chapter including the ability of children to understand personal emotions as well as the emotions of others, the child's intellectual functioning, birth weight of the child, a diagnosis of Attention Deficit Hyperactivity Disorder (ADHD) and a child's experience of abuse. This chapter also provided information on the disruptive behaviors of children diagnosed with Obsessive Compulsive Disorder (OCD). The chapter concluded with methods used in schools to identify disruptive behaviors.

CHAPTER III: THEORETICAL FRAMEWORKS

Overview

This chapter will provide information on the theoretical frameworks that will be utilized to assist in understanding the sources of disruptive behaviors. The theories that will be used to support the literature review include cognitive behavioral theory, systems theory and the risk resiliency model. Also included in this chapter is information regarding prevention efforts with mainstream school settings as well as gaps in school-based service delivery.

Theoretical Frameworks of School-Based Intervention Services.

School-based intervention services have been aligned with a variety of social work theories and models including cognitive-behavioral theory and the risk-resiliency model. The risk--resilience model is utilized in school-based interventions on a more informal level. It is important for school professionals to consider the risk factors faced by children displaying behavioral difficulties including poverty, lack of community services, adequate health

care, attachment and parenting skills of the student's caretakers. Risk factors directly related to school include academic failure, disruptive behavior and the absence of feelings of belonging (Rowney & Quinn, 2000). Resilience factors such as high IQ, easy temperament, social skills and positive relationships with adults also can affect the outcomes of behavior interventions (Steiner, et. al., 1997). Resilience can also be supported in school through the creation of a nurturing school environment in which students are taught the skills and supports needed for success and how to use the skills in multiple settings (Rowney & Quinn, 2000). Teaching skills that students can use in school, at home and in other aspects of the community can increase positive behavior, which may increase resiliency.

Cognitive behavioral theory is often followed in working with students with disruptive behavior disorders. This theory is utilized through a variety of interventions and techniques designed to confront negative behavior and replace them with behaviors that are socially acceptable. It also attempts to alter dysfunctional patterns of thinking by creating alternative views of similar situations and events

that are determined to create a positive self identity in the student.

The underlying assumption of behavioral theory includes that all behavior is learned and as such can be observed, measured and changed through reinforcement or lack of reinforcement. The roots of behavioral theory are largely found in the work of Ivan Pavlov and B.F. Skinner. The contributions of Pavlov, center on respondent conditioning or a learned association between two or more stimuli. The work of Skinner centered on operant conditioning. The term operant refers to behaviors that are voluntary.

Skinner found that the frequency of operant or voluntary behaviors results from the consequence received from the displayed behavior--if a displayed behavior draws a favorable response, it will increase in frequency. If an undesired response occurs, the behavior will decrease in frequency (Nichols & Schwartz, 1998). Client goals will then be reached through the provision of positive reinforcement for desired behaviors thereby increasing those behaviors and negative reinforcement for undesirable behaviors resulting in a decrease in those behaviors.

The main component of cognitive theory involves human emotion and how emotion affects self-identity: "When an individual's internal beliefs, self-talk and thoughts are rational, he or she is experiencing functional emotions; however, when the thoughts and self-talk are irrational, dysfunctional behavior and emotions result" (Turner, page 98).

Another concept of this theory includes that irrational thinking does not occur on a conscious level; irrational thinking is learned to the point that it becomes an automatic response. Change takes place when the client is able to identify dysfunctional thoughts and beliefs and alter them to create a new reality.

Utilization of a combination of both cognitive and behavioral theory is common in school-based intervention services provided to students exhibiting disruptive behavior disorders. Because behavior can be observed, measured and changed, a baseline can be obtained through observing problem behaviors, the effectiveness of the intervention can be measured and outcome will be evident--change will or will not have occurred.

Systems theory is considered to have developed out of a need to address human beings and their social interactions within their living environments. This theory focuses on accepting and analyzing hierarchical family and social systems rather than rejecting and attempting to alter existing systems. It has been argued that "systems theory can assist in understanding institutions, their interactions with one another, and how change might be brought about" (Payne, page 140). An underlying premise of this theory includes that people depend on various systems to obtain or maintain a satisfying existence: "When problems occur, assistance can be offered to aid others in performing life tasks, alleviating distress and achieving goals which are important to them" (Payne, page 142). It also offers hope that change can occur at any level of any system by understanding the interconnectedness and interrelatedness of its parts (Turner, page 613).

This theory pertains to students with disruptive behavior disorders in that the goals include assisting others in utilizing their own abilities to solve problems, building helping relationships, assisting in the modification of interpersonal interactions in the

hope that the interactions will be more successful (Payne, 1997). Teaching children to problem-solve and utilize appropriate means of solving their problems, modeling respectful relationships and assisting them in reacting to situations and others in socially acceptable ways will, hopefully, benefit them in various aspects of life.

Utilizing this theory in working with students with disruptive behavior disorders, it would be necessary to not only address the needs of the child, but also to include the family and social support systems of the child. Systems theory takes into account that each individual affects all those he or she interacts with. Change exhibited in one area or in one individual will cause change in the systems that individual is involved in.

Prevention Efforts in the School Setting

School-based prevention is visible in programs such as the preschool Head Start programs and in special education services. There are other somewhat less obvious areas of prevention contributing to students' success. These include collaboration and wraparound services. Collaboration is a process in

which a variety of professionals representing various disciplines, parents and the student together set goals and methods of goal attainment. Through collaboration efforts, parents, educators, mental health professionals, social workers and families work together toward the attainment of students success; trust, respect and cultural sensitivity are important features that must be reached for successful collaboration (Cheney, 1998).

Wraparound services, while similar to collaboration in that a broad array of participants are involved, are more of a process of services extended beyond the classroom. Wraparound services are based on need for purposes of providing extended educational services to students with disruptive behavioral disorders and their families which allow children to remain in their homes, communities and schools as opposed to placement in alternative setting such as therapeutic foster homes or residential treatment facilities (Eber, Nelson & Miles, 1997,).

The effectiveness of wraparound services is visible in key findings from a 1994--1995 La Grange Area Department of Special Education E/BD Network Study Evaluation. The findings of this study showed a

significant reduction in placements of students in residential facilities, an increase in the number of students able to maintain mainstream educational placements and improvements in teacher ratings of students' classroom performance with students receiving wraparound services (Eber, et. al., 1997).

Arguments have been raised in regard to the benefits of maintaining mainstream educational services in regard to students with disruptive behavior disorders. Many students with behavior difficulties receive no intervention or receive intervention with staff that is not sufficiently trained to work with them. The behavioral distractions can adversely affect the classroom teacher and students. Not until significant changes in teacher training around the issue of behavior disorders takes place, will teachers be prepared to create a classroom environment in which the success of students with behavioral disorders is achieved and the educational needs of non-disabled students are met (Kauffman, Lloyd, Baker & Riedel, 1995).

Further school-based services include such interventions as behavior mapping and support groups. A behavior map can be described as a diagram that is

used by the student as a visual reminder of how to appropriately alter negative behaviors while encouraging accountability. Behavior mapping is a cognitive approach toward behavior modification (Unruh, Anderson & Bartscher, 1997). Student support groups are offered in many schools on a voluntary basis. Support groups can cover a variety of topics and skills and can be viewed as a means of prevention as students with mild to moderate behavioral issues are eligible for the service and in most cases no cost is involved (Wassef, Mason, Collins, VanHaalen & Ingham, 1998).

Gaps in School-Based Service Delivery

While strides have been made toward increasing the effectiveness of approaches in working with children exhibiting disruptive behavior disorders, there continue to be areas of need.

Two deficiencies associated with disruptive behavior disorders specified in existing literature include teacher ratings of behaviors (Abikoff, et. al., 1993) and preventative services (Kauffman, 1999). Further instruction for educators in the area of disruptive behavior disorders including early

identification of problematic behaviors, accessible services and effective strategies for working with these students would be beneficial for teachers as well as students (Abikoff, et. al., 1993). Gaps in the affordability and availability of mental health services abound. Many student with disruptive behavior disorders either do not receive mental health services or the services are received only after the exhibition of sever behaviors--long after preventative measures could have been initiated. Research into the prevention of disruptive behavior disorders does not offer suggestions in addressing every behavioral circumstance. Neither does it suggest that prevention is always possible. Interventions require adaptations to various circumstances and individual needs (Kauffman, 1999).

Research is providing guidelines for the identification of early disruptive behavior disorders and effective methods that can be utilized to further prevent the development of such disorders, yet there continues to be hesitancy in labeling children who display these external behaviors. If a student fails to be identified prior to exhibiting disruptive

behaviors, the student has not been well served (Kauffman, 1999).

Summary

This chapter provided the theoretical frameworks utilized to assist in understanding disruptive behavior disorders including cognitive behavioral theory, systems theory the risk resiliency model. This chapter also provided information regarding the prevention efforts of school systems to address the needs of students with disruptive behaviors. Existing gaps in school-based service delivery concluded this chapter.

CHAPTER IV: METHODOLOGY

Overview

This chapter provides information on the method of research used in this study to obtain information regarding disruptive behavior disorders. Specifically, the research questions, a description of important concepts and units of analysis, the characteristics of the study population, and measurement issues will be described. Data collection instruments and data analysis procedures will be explained and procedures used to ensure the protection of human subjects will be described.

Research Questions

The two research questions addressed by this study include:

- 1) How do elementary school teachers perceive the disruptive behaviors displayed by students?
- 2) According to elementary school teachers, what school-based intervention services are most effective in reducing disruptive behaviors in the classroom?

Research Design

The purpose of this study is to explore teachers' perceptions regarding disruptive behaviors of students and to determine what school-based interventions teachers find to be most effective in reducing disruptive behaviors. Do teachers believe disruptive behaviors are a pertinent issue? Do they have an understanding of some of the aspects that contribute to disruptive behaviors? Do teachers believe social skills classes, behavior plans, mental health services and functional assessments are effective in reducing the number of disruptive behaviors displayed by students? Do teachers understand the purpose of implementing interventions? Do they feel included and valued in the process? Does the number of years the teachers has been employed in a school system affect his or her perception? Do teachers feel more education and/or training on this issue would be beneficial?

This exploration of teachers' perceptions was completed through the use of a cross-sectional quantitative research study. Data was collected from seventy-six currently employed teachers through the use of a self-administered Likert-scale survey. The

data collected will reflect individual teachers beliefs on the day the survey is completed.

This type of research has both strengths and weaknesses. A strength includes that information can easily be gathered from large sample populations. This type of research design is generally strong in reliability (Rubin & Babbie, 1997). This design was chosen for purposes of obtaining data from a larger sample that could be generalized to similar populations. Weaknesses of this type of research design include that by using a cross sectional survey design, data received will represent opinions made at a single point in time.

By using a Likert-scale survey, respondents are not able to provide in-depth information regarding their perceptions and beliefs; they must fit their answers into specifically defined categories. This type of research design is generally weak in validity (Rubin & Babbie, 1997).

Important concepts and units of analysis

For the first research question for this study, how do elementary school teachers perceive the disruptive behaviors displayed by students, the

independent variable is the perception of teachers and the dependent variable is disruptive behavior disorders. For the second research question of this study, what school-based intervention services are most effective in reducing disruptive behaviors in the classroom, the independent variable is disruptive behaviors and the dependent variable is intervention services. For purposes of this research study, elementary school teacher, school-based intervention services and disruptive behaviors are being defined.

Elementary teacher is being operationally defined as a licensed educator currently employed full time as a First through Fifth Grade teacher in a mainstream public school setting. School-based intervention services include social skills classes, the implementation of behavior plans, referrals for mental health services and a functional behavioral assessment. Operational definitions of these terms follow:

Social skills classes: removing a student from the regular classroom to a small group for the purpose of teaching friendship skills, social skills, listening and direction following skills and anger management skills.

Behavior plans: the development of an individualized plan with specific goals focusing on reducing the disruptive behaviors displayed by the individual student.

Referrals for mental health services: a specific parent approved referral to the Family TIES program-- an interagency referral team consisting of a mental health practitioner, a public health representative, a county social worker, the students classroom teacher, the schools social worker and the students parent(s).

Functional behavioral assessment: a special education assessment completed for the purpose of determining if the student meets diagnostic criteria for an emotional/behavioral disorder (E/BD).

Disruptive behaviors: The operational definition of disruptive behaviors for the purpose of this study will include a spectrum of behaviors displayed by students in the classroom. These behaviors include talking out of turn, not remaining seated, arguing with staff members, losing temper, deceitfulness or being purposefully untruthful, theft, defiance toward staff members, verbal threats of harm, physical threats of harm, physical harm to self or others and property destruction. For students who display these

behaviors to be considered students with disruptive behavior disorders, the behaviors must be displayed at a level that is more frequent and/or severe than those typically observed in classroom peers.

The unit of analysis for this study was elementary school teachers. The responses of the participants have been compiled with all responses being noted.

Characteristics of the Study Population

This study was restricted to the five elementary schools located within the four school districts located in Mille Lacs County in the state of Minnesota. These four schools are located in central Minnesota and include school in the towns of Princeton, Milaca, Onamia and Isle. The study population included licensed public school educators of students in First through Fifth Grade, who are full time employees. Participants included both male and female teachers. The study population was restricted to regular classroom educators, eliminating teachers of Special Education.

Recruitment of Participants

To obtain participants for this study, several steps were taken. First, contact was made to Mr. Greg Finck, Principal of South Elementary School in Princeton, Ms. Bid Heidorf, Principal of North Elementary School in Princeton, Ms. Ann Kern, Principal at Milaca Elementary School, Mr. Mike Conner, Dean of Students at Isle Elementary School and Mr. Larry Jallen, Principal at Onamia Elementary School. Permission to distribute the survey in each of their buildings to teachers of students in grades one through five was requested. Verbal permission was received from all principals at the time of the telephone contact. Written permission was requested and has been received from each of the principals as shown in Appendix A-E. Upon approval from school principals, arrangements were made for a brief presentation of the study and distribution of the survey.

This study was conducted having a total of seventy-six participants. Nine participants were first grade teachers, fifteen were second grade teachers, nineteen were third grade teachers, thirteen were fourth grade teachers and fifteen were fifth

grade teachers. Five participants did not note the grade they are currently teaching. Participants for this study were selected using a non-probability quota sampling design. They were not selected at random, but were chosen specifically for the fact that they teach a specific grade in one of several elementary schools.

Procedure

This researcher was asked to attend staff meetings to provide a brief presentation of the study prior to recruiting participants at several of the schools chosen for this study. This procedure was followed at North Elementary School in Princeton, Milaca Elementary School and Isle Elementary School.

The study was introduced to prospective participants, the definition of disruptive behaviors being used in this study was given to teachers along with the questionnaire and consent form. Educators were reminded that participation in this study was voluntary and if they chose to participate, the receipt of their completed survey would imply consent. The researcher left the immediate area while

prospective participants chose whether or not to participate in the study.

Completed surveys were gathered by the researcher and taken from the school buildings. In the Onamia Elementary School, the researcher brought the survey and consent forms to the building principal and provided a brief description of the study. The Principal chose to distribute the survey to prospective participants. Self-addressed, stamped envelopes were included for the participants to mail the completed surveys back to the researcher.

In Princeton's South Elementary School, the building principal requested surveys be placed in each prospective participants individual school mail box. A consent form identifying the study's objectives as well as risks and benefits to participation in the study was placed in appropriate teachers' mailboxes with the survey. Participants were asked to place completed surveys in a designated box for the researcher to pick up at a later date.

The response rates for both Isle Elementary and Onamia Elementary were the highest with all possible participants responding at Isle, $n=10$; 100% and nine of ten participants responding from Onamia, $n=9$; 99%.

North Elementary in Princeton had the next highest response rate which was, $n=26$; 90%. The response rate from South Elementary in Princeton was, $n=13$; 62%; and the rate of response from Milaca Elementary was, $n=18$; 60%. The variation in the rate of response could be explained at least in part by the fact that there was several different methods of survey distribution.

Development of Questionnaire

The measure utilized in this study was developed by the researcher performing this study and reviewed by the thesis advisor. It consisted of a twenty-five question Likert-scale survey designed to gather data that addresses the research questions which focused on teachers perceptions of disruptive behaviors and opinions as to what is the most effective intervention(s).

To control for systematic error, biased words and phrases were checked with other MSW students in a thesis seminar course. Although the likelihood for systematic error was reduced, participants provided answers to questions regarding their individual perceptions pertaining to current employment situations from either positive experiences, negative

experiences or a combination of both. Biases are always a component of systematic error in Likert-scale surveys and this holds true for this study as well. It is likely that social desirability bias, the tendency of people to say things that will make them appear to be giving an appropriate response and acquiescent response set, the agreeing or disagreeing with survey statements regardless of the content of the question, both occurred in this study. To reduce errors of this type, the survey used was designed to be easily understood and specific to assist in gaining appropriate data only.

Quantitative measures were utilized to measure the responses to both research questions including teachers' perceptions of their roles regarding disruptive behaviors displayed by students, and the most effective interventions available for reducing disruptive behaviors. Two levels of measurement were used to analyze the data received from the completed surveys, they are discrete and ordinal measures.

Nominal measures were used in two of the twenty-five questions, which focused on obtaining demographic information from the study participants. Ordinal measures were used in twenty-two of the survey

questions. Ratio measures were used in one of the survey questions focusing on length of time of employment as a teacher. A Likert-scale survey was used to assist in determining how strongly the participants agree or disagree with study statements regarding disruptive behaviors.

Data Analysis

This study examined elementary educators perceptions of the disruptive behaviors displayed by some students and what intervention services educators find most beneficial in addressing and reducing disruptive behaviors. The questionnaire used in this study utilized three different measures, nominal, ordinal and ratio. Univariate and bivariate levels of analysis were used to analyze the data obtained. Frequency distributions which describe the number of times specific components of a variable are observed in the sample, (Rubin & Babbie, 1997), were used as well as crosstabulation. This type of research tends to be high in reliability as all participants receive an identical questionnaire (Rubin & Babbie, 1997).

Although high in reliability, survey research is generally low in validity (Rubin & Babbie, 1997). The

reason being that in utilizing a Likert scale to answer questions regarding perceptions of disruptive behaviors and the effectiveness of school based interventions, participants can not give their own opinions or theories about the issues but are required to fit their responses into previously determined categories.

Protection of Human Subjects

Due to the low level of risk involved in this study, there is not a great need for the protection of human subjects; however, steps were taken to protect the participants and to keep risks to participants minimal.

Prior to the distribution of the survey, approval was received from each building principal (Appendix A-E). Approval was also received from the Augsburg College Institutional Review Board, IRB #2001-23-2 (Appendix F). Subjects willing to participate in this study were asked to share their perceptions and beliefs in regard to the issue of disruptive behaviors displayed by students in their classrooms. The participants were not identified in any way other than the school in which they are employed, the grade they

teach and the number of years they have been employed.

The questions posed to participants were not personal in nature and very little demographic information was included; the participants had little risk for exposure. Subjects from various schools were asked to participate in this study; there is no record as to which teachers responded and which did not. Participants remained anonymous to ensure they were not adversely affected in their workplace environments.

Along with the survey, participants were provided with a letter of consent (Appendix G) which explained the study and informed each individual that participation was voluntary, they could withdraw from participation in the study at any time and that by completing the survey and returning it to the designated area, they were giving their implied consent to participate in the study. All participants were asked to keep their copy of the consent letter for their personal records.

Summary

This chapter explained the method of research used in this study to obtain information regarding disruptive behavior disorders. Specifically, the research questions, a description of important concepts and units of analysis, the characteristics of the study population, and measurement issues were described. Data collection instruments and data analysis procedures were explained and procedures used to ensure the protection of human subjects were presented. The next chapter will present the findings of the data that was gathered and analyzed.

CHAPTER V: RESULTS

Data was collected from seventy-six currently employed teachers of students in grades one through five in four school districts in the county of Mille Lacs, Minnesota. The greatest number of participants, thirty-nine, were educators in the Princeton school district; eighteen participants were educators in the Milaca school district; ten participants were educators in the Isle school district; nine participants were educators in the Onamia school district (See Table 1).

Table 1

YRSTEACH * SCHOOL Crosstabulation

Count	SCHOOL				Total
	isle	milaca	onamia	princeton	
1 - 5 years	4	7	2	10	23
6 - 10 years	3	2		9	14
11 - 15 years	1	2	3	2	8
16 or more years	2	7	4	18	31
	10	18	9	39	76

The length of employment was divided into four categories:

- 1) One to five years teaching.
- 2) Six to ten years teaching.
- 3) Eleven to fifteen years teaching.
- 4) Sixteen or more years teaching.

Thirty-one participants had at least sixteen years of teaching experience and twenty-three participants were in their first five years of teaching. Fourteen participants had been teaching between six and ten years and the least amount of teachers had between eleven and fifteen years of experience.

The grade teaching was divided into five separate categories including first grade, second grade, third grade, fourth grade and fifth grade. Of the participants indicating the grade taught, nine were teachers of first graders, fifteen were teachers of second graders, nineteen were teachers of third graders, thirteen were teachers of fourth graders and fifteen were teachers of fifth graders. Five participants chose not to indicate the grade level they currently teach.

Research Questions

- 1) How do elementary school teachers perceive the disruptive behaviors displayed by students?
- 2) According to elementary school teachers, what school-based intervention services are most effective in reducing disruptive behaviors in the classroom?

To determine teachers' perceptions of disruptive behaviors, frequency distributions were used to analyze participants responses to questions pertaining to some of the factors that contribute to disruptive behaviors.

The first area presented includes what has been categorized as causes of disruptive behaviors. This category includes emotional understanding, intellectual functioning, birth weight, ADHD and the experience of maltreatment (See Tables 2-6).

Table 2 illustrates the variable in question eleven which states, "A student's level of emotional functioning can contribute to disruptive behaviors". Ninety-seven percent of respondents believed that a child's inability to understand emotions, both personal emotions and the emotions of others, contributes to disruptive behaviors.

Table 2

Emotional Understanding		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly agree	45	59.2	59.2	59.2
	agree	29	38.2	38.2	97.4
	undecided	2	2.6	2.6	100.0
	Total	76	100.0	100.0	

Table 3 illustrates the variable in question ten which states, "A student's level of intellectual functioning can contribute to disruptive behaviors in the classroom." Eighty-eight percent of respondents believed that having lower intellectual functioning abilities can contribute to disruptive behaviors; ten and one-half percent, disagreed.

Table 3

I.Q		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly agree	24	31.6	31.6	31.6
	agree	43	56.6	56.6	88.2
	undecided	1	1.3	1.3	89.5
	disagree	7	9.2	9.2	98.7
	strongly disagree	1	1.3	1.3	100.0
	Total	76	100.0	100.0	

Table 4 illustrates the variable in question twelve which states, "A child's weight at birth can contribute to disruptive behavior." Sixteen percent of respondents agreed that a child's birth weight can

contribute to disruptive behaviors, while thirteen percent disagreed, and seventy-two percent were undecided.

Table 4

Birthweight		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly agree	1	1.3	1.3	1.3
	agree	10	13.2	13.3	14.7
	undecided	54	71.1	72.0	86.7
	disagree	10	13.2	13.3	100.0
	Total	75	98.7	100.0	
Missing	System	1	1.3		
Total		76	100.0		

Table 5 illustrates the variable in question thirteen that states, "Attention deficit hyperactivity disorder can contribute to disruptive behavior." Ninety-seven percent of respondents believed that the presence of ADHD contributes to disruptive behaviors in children. Three percent were undecided.

Table 5

ADHD		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly agree	39	51.3	51.3	51.3
	agree	35	46.1	46.1	97.4
	undecided	2	2.6	2.6	100.0
	Total	76	100.0	100.0	

Table 6 illustrates the variable in question fourteen that states, "A child who has experienced abuse is more likely than an unabused child to display disruptive behaviors." Sixty-five percent of respondents agreed that a child's experience of maltreatment contributed to disruptive behaviors in children. Thirty-five percent either disagreed or were uncertain.

Table 6

Experience of Maltreatment		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly agree	17	22.4	22.4	22.4
	agree	32	42.1	42.1	64.5
	undecided	21	27.6	27.6	92.1
	disagree	6	7.9	7.9	100.0
	Total	76	100.0	100.0	

Table 7 gives another look at the information presented in tables two through six. It is a combination of those tables.

Table 7

Between-Subjects Factors

		Value Label	N
I.Q	1.00	strongly agree	23
	2.00	agree	43
	3.00	undecided	1
	4.00	disagree	7
	5.00	strongly disagree	1
E.Q	1.00	strongly agree	44
	2.00	agree	29
	3.00	undecided	2
BWEIGHT	1.00	strongly agree	1
	2.00	agree	10
	3.00	undecided	54
	4.00	disagree	10
ADHD	1.00	strongly agree	39
	2.00	agree	34
	3.00	undecided	2
ABUSE	1.00	strongly agree	16
	2.00	agree	32
	3.00	undecided	21
	4.00	disagree	6

This information on the causes of disruptive behavior was compared to teachers' responses as to the degree of the problem of disruptive behaviors (See Table 8). Eighty-three percent of respondents believe that disruptive behaviors displayed by students have become more prevalent in the past five years. Seventy-eight percent believe the disruptive behaviors displayed by elementary students have become

increasingly violent. Ninety-six percent indicated that disruptive behaviors are a concern at their school of employment.

Table 8

Between-Subjects Factors			
		Value Label	N
PREVALEN	1.00	strongly agree	33
	2.00	agree	30
	3.00	undecided	12
	4.00	disagree	1
VIOLENT	1.00	strongly agree	19
	2.00	agree	40
	3.00	undecided	12
	4.00	disagree	5
CONCERN	1.00	strongly agree	42
	2.00	agree	31
	3.00	undecided	3

Crosstabulation was completed to determine if the number of years of teaching experience has an effect on whether or not disruptive behaviors are viewed as being a concern (See Table 9). Of the seventy-three educators agreeing that such behaviors are concerning, thirty-one had been employed for sixteen or more years. Twenty-two of those thirty-one strongly agreed. Six had been employed between eleven and fifteen years. Three of those six strongly agreed. An additional fourteen respondents had been employed between six and ten years. Nine of those fourteen

strongly agreed. Twenty-two teachers employed for one to five years viewed this as a concern. Eight of those twenty-two strongly agreed.

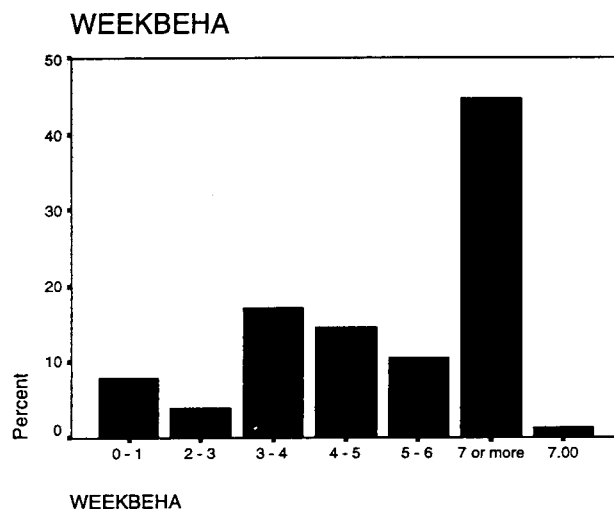
Table 9

YRSTEACH * CONCERN Crosstabulation

Count		CONCERN			Total
		strongly agree	agree	undecided	
YRSTEACH	1 - 5 years	8	14	1	23
	6 - 10 years	9	5		14
	11 - 15 years	3	3	2	8
	16 or more years	22	9		31
Total		42	31	3	76

Twenty-four teachers indicated they have three students in their classroom that display disruptive behaviors. Fourteen indicated they have five or more students who displayed disruptive behaviors. When questioned as to the frequency of disruptive behaviors observed in a week, the majority of teachers (forty-four percent) indicated they observe seven or more (See Table 10).

Table 10



To determine what school-based intervention services teachers have found to be most effective in reducing disruptive behaviors of classroom students, frequency distributions were used to analyze participants' responses to questions pertaining to the effectiveness of available interventions.

Thirty-six percent of respondents believed that social skills classes are effective in reducing the occurrence of disruptive behaviors. This is compared to twenty-five percent who disagreed that teaching social skills was effective in reducing disruptive behaviors.

Behavior plans for students appears to have a

higher rate of approval by educators. Fifty-two percent believe they are effective while twenty-five percent disagree.

Referrals for mental health services was one of the interventions presented in this study. Forty-seven percent of educators believe this is effective in reducing disruptive behaviors, while nineteen percent disagree.

The completion of a functional assessment is the last school-based intervention included in this study. Twenty-one percent of participants believe this to be an effective intervention for students while twenty-four percent disagree to its effectiveness.

Crosstabulation was also completed to determine the level of comfort teachers experience in consulting with other school staff regarding the disruptive behaviors of their students (See Table 11). Teachers with the greatest and least number of years of experience felt most comfortable in consulting with school staff. Twelve teachers with one to five years of experience strongly agreed. Five teachers with six to ten years of experience strongly agreed. Two teachers with eleven to fifteen years of teaching

experience strongly agreed. Eight teachers with sixteen or more years of experience strongly agreed.

Table 11

YRSTEACH * CONSULT Crosstabulation
Count

		CONSULT				Total
		strongly agree	agree	undecided	disagree	
YRSTEACH	1 - 5 years	12	9	1	1	23
	6 - 10 years	5	7	2		14
	11 - 15 years	2	5	1		8
	16 or more years	8	19	3		30
Total		27	40	7	1	75

Summary

These findings indicate that teachers do have an understanding of some of the factors that can contribute to disruptive behaviors displayed by elementary students. The areas that could further be addressed include that of the birth weight of the child and the child's experience of maltreatment.

Teachers also appear to concur that disruptive behaviors are becoming increasingly prevalent, violent and are a concern of educational staff.

The findings in regard to what school-based intervention services teachers believe to be most

effective are varied. Behavior plans and referrals for mental health services received the highest percentages; however, ninety-seven percent of respondents agreed that a combination of services is most effective in reducing disruptive behaviors.

CHAPTER VI: FINDINGS

This was an exploratory study of currently employed educators of elementary students in grades one through five. There were seventy-six participants involved in this study. The goal of this study was to gain an understanding as to the perceptions of elementary teachers in regard to the disruptive behaviors displayed by some students and to determine what school-based intervention services are most effective in reducing the occurrence of disruptive behaviors in the classroom. This chapter will discuss the major findings of the study and how they relate to the literature review and theoretical frameworks used as a part of this study.

Summary of Findings

There were several findings identified in this study. These findings are associated with number of years of experience teaching, understanding of factors that contribute to disruptive behaviors in children, comfort level felt in consulting with other school professionals and effective interventions.

The number of years of teaching experience was shown to provide a better understanding of the degree of the problem of disruptive behaviors; however, the more years of experience, the less comfort was felt in consulting with appropriate school staff regarding disruptive behaviors. A vast majority of respondents (ninety-seven percent) indicated that a combination of services is most effective in reducing the disruptive behaviors of students.

Discussion

The literature reviewed for this study, contained information that violent behavior in youth is increasing. Various studies included the rising need for mental health services for youth and the benefit from receiving such services, while at the same time noting many children will not have access to the services needed.

This information was also determined in this study. A majority of respondents, seventy-eight percent, indicated the disruptive behaviors displayed in their classrooms are becoming more violent than in the past. Ninety-six percent of the respondents indicated that many staff members in schools they are

employed in are concerned about the disruptive behaviors of students. Forty-seven percent of participants also indicated that mental health services are beneficial for students in addressing their behavioral difficulties.

The literature reviewed for this study states that mental health services alone and on an individual basis have not been found to easily modify factors that contribute to disruptive behaviors in children (Braswell, August, Bloomquist, Realmuto, Skare & Crosby, 1997). "Psychotherapeutic interventions with children have not been as successful in practice as laboratory studies suggest" (Evans, Alelrod & Sapia, page 191). The finding of this study indicate that less than fifty percent of respondent believed mental health services were most effective in reducing disruptive behaviors. Yet, ninety-seven percent indicated that a combination of services, including mental health services, is most beneficial.

The importance of an interdisciplinary approach, collaboration between teachers, family members and service providers, in working to reduce disruptive behaviors is also discussed in the literature. Collaboration is defined as the "process that leads to

the attainment of goals that cannot be efficiently achieved by any one agent" (Cheney, page 88). Eighty-nine percent of the participants in this study indicated they were comfortable in consulting with other school professionals regarding the disruptive behaviors of their classroom students.

An area that raises concern is the discrepancy between information found in the literature review pertaining to the effects of abuse or maltreatment on the behavior of children and the participant's responses on that issue. Existing literature notes a connecting between disruptive behaviors and the experience of abuse: "poor parental use of discipline can be a first step in a developmental sequence that leads to antisocial behavior" (Brenner & Fox, page 251). Children who have experienced abuse through parenting practices and inconsistencies in discipline practices incur a higher risk level for developing a disruptive behavior disorder (Steiner, et. al, 1997).

Approximately sixty-five percent of the participants felt that a child's experience of abuse could contribute to disruptive behaviors. Thirty-six percent were either undecided or disagreed with this statement.

The interventions teachers found to be effective in working with students with disruptive behaviors varied to some degree. Thirty-five percent of participants agreed that social skills classes were most effective in reducing disruptive behaviors, thirty-nine percent were undecided and twenty-five percent disagreed. Fifty-two percent indicated that behaviors plans were most effective in reducing disruptive behaviors, twenty-three percent were undecided and five percent disagreed. Forty-seven percent of the participants noted that mental health services were most effective in reducing disruptive behaviors, thirty-five percent were undecided and nineteen percent disagreed. Twenty-one percent agreed that a functional assessment was most effective in reducing disruptive behaviors while fifty-five percent were undecided and twenty-four percent disagreed. A majority of participants, ninety-seven percent, indicated that a combination of services is most effective in reducing disruptive behaviors. One percent were undecided and one percent disagreed.

Limitations

There were several limitations to this study. Limitations are found in the survey itself, for example the Likert-scale format contains five possible responses for a large majority of the questions including strongly agree, agree, undecided, disagree and strongly disagree. The including of the choice undecided, allowed for respondents to fail to provide answers to many of the questions. On several questions, the choice undecided received nearly as many responses as the other possibilities.

The wording of several of the survey questions pertaining to school-based interventions is biased containing the words "most effective." The word "level" used in questions ten and eleven may have lead to confusion or differences in interpretation for the study participants. The word "level" could refer to either a high level or low level of functioning.

The study may have benefited from including more demographic information such as age, gender, race. More specific information could have then been obtained and analyzed according to these categories.

The fact that the survey was distributed by several methods may have had an impact on the study.

Some participants may have felt pressured to complete the survey or may not have taken it seriously.

This study would have benefited from including qualitative data. A better understanding of teacher's perceptions would have been obtained had they been able to provide their own answers rather than having to fit their answers into specific categories.

The information obtained through this study can provide information for future research. There is a need for further research into the perceptions of teachers regarding the disruptive behaviors of their students and data indicates these behaviors will continue to increase over the next several decades. Because of this, it will also be important to continue assessing the effectiveness of school-based intervention services. The development of new interventions to address student's needs is also an area to be considered.

Implications for Practice and Policy in Social Work

This study on teachers' perceptions of disruptive behavior disorder of elementary students and their beliefs as to the most effective school-based

intervention services has definite implications for social work practice and policy. The importance of educating teachers in regard to factors that contribute to disruptive behaviors will benefit educators by providing them with a better understanding of the life experiences of their students. By understanding the causes of disruptive behaviors, teacher will be better able to recognize when additional services would benefit the student. They will also be better able to provided needed empathy and consistency.

School social workers as well should be aware of this information. Social workers in the school setting should be willing to provide education and training to educators on factors contributing to disruptive behaviors to teachers. Increasing the awareness of educators especially in the area of the effects of abuse may lead to teachers being more comfortable reporting incidents of suspected maltreatment of their students. This increased reporting may then result in early services to children and their families.

Having information from educators that pertains to the successes they have experienced also has implications for social work policy and practice.

Social workers are often consulted by teachers as to social services available in the community, the mental health of children and appropriate interventions.

When educators are able to share their successes in working with students with disruptive behaviors, that information may then be passed on to others working with students with similar difficulties. The result may be that earlier successes may be achieved.

Another area of importance found in this study pertains to the information received from teachers regarding functional assessments. Only twenty-one percent of respondents indicated that functional assessment are most beneficial in reducing disruptive behavior disorders. The significance in this finding lies in that school's in Minnesota are mandated to provide this type of intervention. Students displaying a level of difficulty either academically, emotionally or and/or behaviorally are required to be assessed, with parental consent, to determine a level of services. Functional assessments, also known as special educational assessments, require much time in service planning, coordination and monitoring. If functional assessments are not providing students with the appropriate services they need, there may be some

component missing. This is an area for further research.

This study shows a need for an interdisciplinary approach to the provision of services to students. Educators, social workers, public health workers and mental health providers each represent an area of specialty. In examining a student across settings--school, home, community--a greater awareness of his or her needs may be gained. This can lead to more appropriate and thorough provision of services that can be of greater benefit to the student and his or her family.

Surveys, such as this, are important in identifying teachers' perceptions and experiences as they provide an anonymous means by which thoughts and ideas can be made known without the pressure of feeling like the correct answer or most socially acceptable answer must be given.

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AUGSBURG



C • O • L • L • E • G • E

MEMORANDUM

TO: Peggy Sue Swenson

FROM: Maria Dimis, Ph.D., Co-Chair

RE: YOUR RECENT IRB APPLICATION

DATE: 17 March 2001

I am writing on behalf of the College's Institutional Review Board on the Use of Human Subjects. Your proposed study, "Disruptive Behavior Disorders and School-Based Intervention Services" has been approved. Your IRB approval number is 2001-23-2. Please use this number on all-official correspondence and written materials relative to your study.

The IRB committee wishes you the best in your research.

cc: Professor Rosemary Link, Ph.D., and Advisor

DEPARTMENT OF SOCIAL WORK

Campus Box #51 • 2211 Riverside Avenue • Minneapolis MN 55454 • Tel. (612)330-1189 • Fax (612)330-1493

Independent School District No. 480

Onamia Public Schools

35465 - 125th Avenue
Onamia, MN 56359

(320) 532-4174
(FAX) 532-4658

Serving the educational needs of the Mille Lacs Lake area.

April 3, 2001

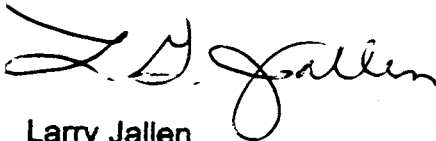
Peggy Swenson
11524 85th Avenue
Milaca, MN 56353

Dear Ms. Swenson:

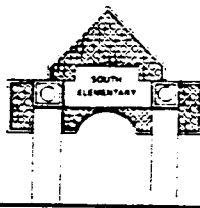
This letter is in response to your request for permission to distribute a survey regarding disruptive behavior disorders and school based intervention services of students in grades 1-5.

Onamia Elementary is willing to assist you in your thesis research by granting permission for you to distribute your survey to our staff. I understand that participation in this study involves minimal risk and is completely voluntary. Please contact me at your convenience to schedule a time and date for a brief presentation of your study and for recruitment of educators.

Sincerely,



Larry Jallen
Principal



South Elementary School

Princeton Public Schools

5 South Eighth Avenue
Princeton, MN 55371
Greg Finck • Principal
3-389-6901

706 First Street
Princeton, MN 55371
Randal Eckart, Ed.D. • Superintendent
763-389-2422

March 9, 2001

Peggy Swenson
11524 85th Avenue
Milaca, MN 56353

Dear Ms. Swenson:

This letter is in response to your request for permission to distribute a survey regarding disruptive behavior disorders and school based intervention services to educators of students in grades 1 - 5.

South Elementary is willing to assist you in your thesis research by granting permission for you to distribute your survey to our staff. I understand that participation in this study involves minimal risk and is completely voluntary. Please contact me at your convenience to schedule a time and date for a brief presentation of your study and for recruitment of educators.

Sincerely,

Greg Finck
Principal

NORTH ELEMENTARY SCHOOL

Sharon Skarohlid, Secretary
763-389-6854

1202 NORTH 7TH AVENUE
PRINCETON, MN 55371

E. Bid Heidorf, Principal
763-389-6802

Phone: 763-389-6801

FAX: 763-389-6850

March 12, 2001

1

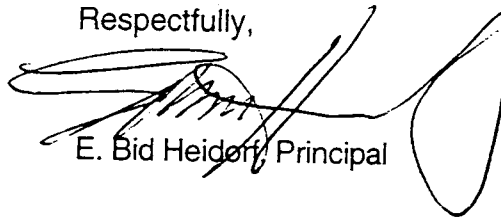
Peggy Swenson
11524 85th Avenue
Milaca, MN 56353

Dear Ms. Swenson:

This letter is in response to your request for permission to distribute a survey regarding disruptive behavior disorders and school-based intervention services to educators of students in grades 1 - 5.

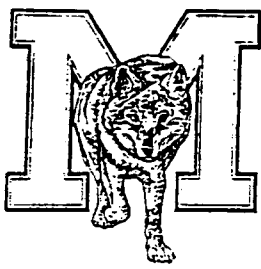
North Elementary is willing to assist you in your thesis research by granting permission for you to distribute your survey to our staff. I understand that participation in this study involves minimal risk and is completely voluntary. Please contact me at your convenience to schedule a time and date for a brief presentation of your study and for recruitment of educators.

Respectfully,



E. Bid Heidorf, Principal

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Princeton Public Schools



MILACA PUBLIC SCHOOLS

DISTRICT 912

500 Highway 23 W.
Milaca, MN 56353-1147
D.O. Phone (320) 982-7210
D.O. Fax (320) 982-7179

DR. BARBRA ZAKRAJSEK
Superintendent

JOAN BRADACH
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Vice-Chairperson

Laurie Gahm
Clerk

Jackie Struffert
Treasurer

Warren D. Liepitz
Director

Calvin Beumer
Director

Linda Ramson
Director

March 12, 2001

1

Peggy Swenson
11524 - 85th Avenue
Milaca, Minnesota 56353

Dear Ms. Swenson,

This letter is in response to your request for permission to distribute a survey regarding disruptive behavior disorders and school based intervention services to educators of students in grades 1 - 5.

Milaca Elementary is willing to assist you in your thesis research by granting permission for you to distribute your survey to our staff. I understand that participation in this study involves minimal risk and is completely voluntary. Per our phone call of last week you will meet with our teaching staff on Thursday, March 20 at 3:20 to explain the survey and distribute the survey.

Sincerely yours,

Ann T. Kern
Elementary principal



Independent School District 473

730 Fifth Avenue South Isle, Minnesota 56342

Herbert S. Nyquist Elementary School
Michael L. Conner, Dean of Students
P.O. Box 54
Isle, Minnesota 56342 - 0054
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Isle High School
Jeffrey J. Searles, Dean of Students
P.O. Box 25
Isle, Minnesota 56342-0025
(320) 676-3101
FAX (320) 676-1034

March 6, 2001

Peggy Swenson
11524 85th Avenue
Milaca, MN 56353

Dear Ms. Swenson:

This letter is in response to your request for permission to distribute a survey regarding disruptive disorders and school based intervention services to educators of students in grades 1-5.

Nyquist Elementary is willing to assist you in your thesis research by granting permission for you to distribute your survey to our staff. I understand that participation in this study involves a minimal risk and is completely voluntary. Please contact me at your convenience to schedule a time and date for a brief presentation of your study and for recruitment of educators

Sincerely,

A handwritten signature in cursive script that reads 'Michael Conner'.

Michael Conner
Dean of Students

Appendix G

Informed Consent

Disruptive Behavior Disorders and School Based Intervention Services

You are invited to participate in a research study of the disruptive behaviors being displayed by some elementary students and the intervention services available. You were selected as a possible participant because you are a practicing educator of elementary school students within the Mille Lacs County Local Coordinating Council. Your participation in this study is completely voluntary. I ask that you read this form carefully and ask any questions you may have before agreeing to be a participant in this study.

This study is being conducted by Peggy Swenson, as part of her Masters of Social Work thesis at Augsburg College, Minneapolis, Minnesota.

Background Information:

The purpose of this study is to obtain information regarding how elementary school teachers view their role in working with students in their classrooms who exhibit emotional and behavioral difficulties. Survey questions included in this study will focus on gathering information concerning what school based intervention services teachers believe are most effective in reducing the emotional and behavioral difficulties displayed by students in the classroom.

Procedures:

If you agree to be in this study, I ask that you do the following:

- 1) Read this consent form and ask any questions you may have. Your completion and return of this survey implies you have sign your consent.
- 2) Complete the survey, which takes approximately ten minutes.

Risks and Benefits of Participating in the Study:

The risk involved in participating in this study includes that you may feel pressured to provide answers to the survey questions that you believe are the correct answers. The purpose of this study is to obtain the honest perception of teachers without judgment of right and wrong. If you wish to skip any of the survey questions, you may do so.

There are no direct benefits to participation in this study.

Appendix G

Indirect benefits to participation in this study may include an increased understanding of disruptive behavior disorders and the types of interventions available within the school system.

Confidentiality:

The records of this study will be kept private. Any report that may be published will not include any information that will identify you. Research records will be kept in a locked file; only the researcher and the Thesis Advisor will have access to the records.

Raw data obtained for the purpose of this study will be destroyed by August 31, 2001.

Voluntary Nature of the Study:

Your decision to participate in this study is completely voluntary. Your decision to participate or not to participate in this study will not affect your current or future relationship with Augsburg College or any of the schools involved in the Mille Lacs County Local Coordinating Council. If you decide to participate, you are free to withdraw at any time without consequence.

Contacts and Questions:

The researcher conducting this study is Peggy Swenson. You may ask any questions you have now. If you have questions later, you may contact me at 320-983-3748.

You may also contact Dr. Rosemary Link, Professor at Augsburg College, Minneapolis, Minnesota, who is the Thesis Advisor for this project at 612-330-1147.

Please keep this form for your records.

Statement of Consent:

I have read the above information or have had it read to me. I have received answers to questions asked. I consent to participate in the study.

Completion and return of the attached survey questionnaire implies that you have given your consent to participate in this study.

Appendix H

QUESTIONNAIRE

- 1) I am currently employed as a teacher of:
- | | | |
|--------------|--------------|-------------|
| First Grade | Second Grade | Third Grade |
| Fourth Grade | Fifth Grade | |
- 2) I have been employed as a teacher for:
- | | | | | |
|------------|-----------|------------|-------------|-----------|
| First year | 1-5 years | 6-10 years | 11-15 years | 16+ years |
|------------|-----------|------------|-------------|-----------|
- 3) I am currently employed in the:
- | | |
|----------------------|-------------------------|
| Isle School System | Milaca School System |
| Onamia School System | Princeton School System |
- 4) Disruptive behaviors displayed by students have become more prevalent in the past five years:
- | | | | | |
|----------------|-------|-----------|----------|-------------------|
| strongly agree | agree | undecided | disagree | strongly disagree |
|----------------|-------|-----------|----------|-------------------|
- 5) The disruptive behaviors displayed by students are becoming more violent
- | | | | | |
|----------------|-------|-----------|----------|-------------------|
| strongly agree | agree | undecided | disagree | strongly disagree |
|----------------|-------|-----------|----------|-------------------|
- 6) The disruptive behaviors of students are a concern of the staff in my school
- | | | | | |
|----------------|-------|-----------|----------|-------------------|
| strongly agree | agree | undecided | disagree | strongly disagree |
|----------------|-------|-----------|----------|-------------------|
- 7) How many students in your classroom exhibit disruptive behaviors?
- | | | | | | |
|---|---|---|---|---|----|
| 0 | 1 | 2 | 3 | 4 | 5+ |
|---|---|---|---|---|----|
- 8) Estimate the number of disruptive behaviors you observe from your classroom students in an average week.
- | | | | | | |
|-----|-----|-----|-----|-----|----|
| 0-1 | 2-3 | 3-4 | 4-5 | 5-6 | 7+ |
|-----|-----|-----|-----|-----|----|

Appendix H

- 9) Disruptive behaviors can have many causes.
- strongly agree agree undecided disagree strongly disagree
- 10) A student's level of intellectual functioning can contribute to disruptive behaviors in the classroom.
- strongly agree agree undecided disagree strongly disagree
- 11) A student's level of emotional functioning can contribute to disruptive behaviors.
- strongly agree agree undecided disagree strongly disagree
- 12) A child's weight at birth can contribute to disruptive behavior.
- strongly agree agree undecided disagree strongly disagree
- 13) Attention deficit hyperactivity disorder can contribute to disruptive behavior.
- strongly agree agree undecided disagree strongly disagree
- 14) A child who has experienced abuse is more likely than an unabused child to display disruptive behaviors.
- strongly agree agree undecided disagree strongly disagree
- 15) Social Skills classes are most effective in reducing disruptive behaviors.
- strongly agree agree undecided disagree strongly disagree
- 16) Behavior plans are most effective in reducing disruptive behaviors.
- strongly agree agree undecided disagree strongly disagree
- 17) Mental health services are most effective in reducing disruptive behavior.
- strongly agree agree undecided disagree strongly disagree
- 18) Functional assessments are most effective in reducing disruptive behavior.
- strongly agree agree undecided disagree strongly disagree

Appendix H

- 19) A combination of interventions is most effective in reducing disruptive behaviors.
- strongly agree agree undecided disagree strongly disagree
- 20) Implementing interventions in the school are important in reducing disruptive behaviors.
- strongly agree agree undecided disagree strongly disagree
- 21) I feel included and valued in the implementation of behavioral interventions.
- strongly agree agree undecided disagree strongly disagree
- 22) I feel frustrated with the lack of support I receive in working with students exhibiting disruptive behaviors.
- strongly agree agree undecided disagree strongly disagree
- 23) I feel comfortable in my skills in teaching students with disruptive behaviors.
- strongly agree agree undecided disagree strongly disagree
- 24) I feel comfortable consulting with special education teachers, school social workers and school psychologists regarding the disruptive behaviors of the students in my classroom.
- strongly agree agree undecided disagree strongly disagree
- 25) I would like more education and training focused on this issue.
- strongly agree agree undecided disagree strongly disagree

